



UMA Foundation Medical Student Scholarship Application

The UMA Foundation offers limited scholarships to medical students who are currently attending medical school in Utah. Limited scholarships are given to students **who are members** of the Utah Medical Association (UMA) who submit an application (this sheet) and an essay (300-500 words) about the importance of participating with the Utah Medical Association and being part of the UMA Medical student section. Also, include how you can help recruit other medical students to participate in the Utah Medical Association. The UMA Foundation Board then selects students to receive a scholarship based solely on the ranking of the medical student paragraph, the qualifications of participation (UMA membership), and whether or not the application is complete. There are a limited number of scholarships available. Each scholarship can be used by the student for anything they wish. The scholarships are \$1,500 each and the UMA Foundation will award probably between 14-20 scholarships depending on funds available, as determined by the UMA Foundation Board.

Please fill in the application below and submit your essay by no later than April 30, 2025. Submit the application and essay to michelle@utahmed.org with a cc'd copy to kelly@utahmed.org. You will receive information about whether or not you receive the scholarship by June 5, 2025. Please ensure that all your information is accurate so we can verify it and communicate with you and send you a check if you are selected for the scholarship. If we do not have the correct information, we will not award scholarships to those with incomplete applications.

APPLICATION

Legal Name in full _____
(Print/Type) Last Name First Name Middle Initial

Permanent Residence/Address _____
Number, Street, and Apartment Number

City State ZIP

Email address where student can be contacted _____

Student phone number _____

Utah Medical School student is attending _____

First Year of Medical School _____ Expected Graduation Date _____

I, _____, certify that I am currently attending _____ Medical School in _____, Utah. I affirm that this application, including the qualifying paragraph, is my own work. I affirm that the information contained herein is true and accurate to the best of my knowledge and belief. I give permission to the UMA Foundation to verify my information with the medical school.

Date _____

Signature _____

Provide an essay (300-500 words) about the importance of participating with the Utah Medical Association and being part of the UMA Medical student section.